

ALDEN-MEADOW PARK HEALTH CARE CENTER

709 MEADOW PARK DRIVE, P.O. BOX 309

CLINTON 53525 Phone:(608) 676-2202

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/02): 94

Total Licensed Bed Capacity (12/31/02): 94

Number of Residents on 12/31/02: 73

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Corporation

Skilled

No

Yes

Yes

69

Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	53.4		
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years	31.5		
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	6.8	More Than 4 Years	15.1		
Day Services	No	Mental Illness (Org./Psy)	45.2	65 - 74	15.1	-----	-----		
Respite Care	Yes	Mental Illness (Other)	4.1	75 - 84	34.2		100.0		
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	37.0	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.4	95 & Over	6.8	Full-Time Equivalent			
Congregate Meals	No	Cancer	4.1		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	4.1		100.0	(12/31/02)			
Other Meals	No	Cardiovascular	4.1	65 & Over	93.2	-----			
Transportation	No	Cerebrovascular	13.7		-----	RNs	4.7		
Referral Service	No	Diabetes	2.7	Sex	%	LPNs	10.6		
Other Services	No	Respiratory	2.7	-----	-----	Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	17.8	Male	35.6	Aides, & Orderlies			
Mentally Ill	No		-----	Female	64.4	39.9			
Provide Day Programming for			100.0		-----				
Developmentally Disabled	No				100.0				

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## Method of Reimbursement

			Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care							
			No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
			Per Diem (\$)		Per Diem (\$)		Per Diem (\$)		Per Diem (\$)		Per Diem (\$)		Per Diem (\$)		Per Diem (\$)		Per Diem (\$)		Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0		0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Skilled Care	13	100.0	277		52	96.3	115		5	83.3	159		0	0.0	0	0.0	0	0.0	70	95.9
Intermediate	---	---	---		2	3.7	97		1	16.7	149		0	0.0	0	0.0	0	0.0	3	4.1
Limited Care	---	---	---		0	0.0	0		0	0.0	0		0	0.0	0	0.0	0	0.0	0	0.0
Personal Care	---	---	---		0	0.0	0		0	0.0	0		0	0.0	0	0.0	0	0.0	0	0.0
Residential Care	---	---	---		0	0.0	0		0	0.0	0		0	0.0	0	0.0	0	0.0	0	0.0
Dev. Disabled	---	---	---		0	0.0	0		0	0.0	0		0	0.0	0	0.0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0		0	0.0	0		0	0.0	0		0	0.0	0	0.0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0		0	0.0	0		0	0.0	0		0	0.0	0	0.0	0	0.0	0	0.0
Total	13	100.0			54	100.0			6	100.0			0	0.0			0	0.0	73	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02			
		-----			
Percent Admissions from:		Activities of		% Needing	Total
		Daily Living (ADL)		Assistance of	Number of
				One Or Two Staff	Residents
				% Totally	
				Dependent	
Private Home/No Home Health	7.0	Bathing	0.0	68.5	73
Private Home/With Home Health	14.8	Dressing	19.2	50.7	73
Other Nursing Homes	2.3	Transferring	38.4	49.3	73
Acute Care Hospitals	72.7	Toilet Use	35.6	50.7	73
Psych. Hosp.-MR/DD Facilities	0.0	Eating	65.8	21.9	73
Rehabilitation Hospitals	0.0	*****			
Other Locations	3.1				
Total Number of Admissions	128	Continence	%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	6.8	Receiving Respiratory Care	9.6
Private Home/No Home Health	7.6	Occ/Freq. Incontinent of Bladder	60.3	Receiving Tracheostomy Care	1.4
Private Home/With Home Health	30.3	Occ/Freq. Incontinent of Bowel	16.4	Receiving Suctioning	0.0
Other Nursing Homes	5.9	Mobility	0.0	Receiving Ostomy Care	2.7
Acute Care Hospitals	15.1			Receiving Tube Feeding	2.7
Psych. Hosp.-MR/DD Facilities	0.0			Receiving Mechanically Altered Diets	28.8
Rehabilitation Hospitals	0.0	Physically Restrained		Other Resident Characteristics	
Other Locations	3.4	Skin Care		Have Advance Directives	79.5
Deaths	37.8	With Pressure Sores	4.1	Medications	
Total Number of Discharges		With Rashes	1.4	Receiving Psychoactive Drugs	63.0
(Including Deaths)	119				

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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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	This Facility	Ownership: Proprietary		Bed Size: 50-99		Licensure: Skilled		All Facilities	
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	73.1	84.7	0.86	87.1	0.84	85.3	0.86	85.1	0.86
Current Residents from In-County	90.4	81.6	1.11	81.5	1.11	81.5	1.11	76.6	1.18
Admissions from In-County, Still Residing	28.1	17.8	1.58	20.0	1.40	20.4	1.38	20.3	1.38
Admissions/Average Daily Census	185.5	184.4	1.01	152.3	1.22	146.1	1.27	133.4	1.39
Discharges/Average Daily Census	172.5	183.9	0.94	153.5	1.12	147.5	1.17	135.3	1.27
Discharges To Private Residence/Average Daily Census	65.2	84.7	0.77	67.5	0.97	63.3	1.03	56.6	1.15
Residents Receiving Skilled Care	95.9	93.2	1.03	93.1	1.03	92.4	1.04	86.3	1.11
Residents Aged 65 and Older	93.2	92.7	1.01	95.1	0.98	92.0	1.01	87.7	1.06
Title 19 (Medicaid) Funded Residents	74.0	62.8	1.18	58.7	1.26	63.6	1.16	67.5	1.10
Private Pay Funded Residents	8.2	21.6	0.38	30.0	0.27	24.0	0.34	21.0	0.39
Developmentally Disabled Residents	0.0	0.8	0.00	0.9	0.00	1.2	0.00	7.1	0.00
Mentally Ill Residents	49.3	29.3	1.68	33.0	1.49	36.2	1.36	33.3	1.48
General Medical Service Residents	17.8	24.7	0.72	23.2	0.77	22.5	0.79	20.5	0.87
Impaired ADL (Mean)	44.4	48.5	0.91	47.7	0.93	49.3	0.90	49.3	0.90
Psychological Problems	63.0	52.3	1.21	54.9	1.15	54.7	1.15	54.0	1.17
Nursing Care Required (Mean)	6.3	6.8	0.94	6.2	1.02	6.7	0.94	7.2	0.88